



# Iowa Department of Human Services

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## INFORMATIONAL LETTER NO.1813-MC-FFS

**DATE:** August 8, 2017

**TO:** Iowa Medicaid Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC)

**APPLIES TO:** Managed Care (MC), Fee-for-Service (FFS)

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** CMS 1500 Billing Clarification for FQHCs and RHCs

**EFFECTIVE:** Immediately

This communication is a clarification to the current IME billing instructions for the CMS 1500 claim form. These instructions pertain to FQHCs and RHCs. The billing instructions have been updated to include these clarifications.

- **Box 24d, line 1- Procedures, Services or Supplies:** Bill the encounter code T1015 on the first claim line. This code is “all-inclusive” of any/all services rendered for a given date of service. Bill any applicable specific procedure code(s) on subsequent claim lines with \$0.00 charge as “informational only.” Claims that are submitted without the “informational only” procedure codes will be denied.
- **Box 24j – Rendering Provider ID. #:** Enter the FQHC/RHC clinic National Provider Identifier (NPI) number or leave blank.
- **Box 32 – Service Facility Location Information:** Enter the service facility location information. The address must be a physical location and cannot be a P.O. Box.
- **Box 33a – Billing Provider Information and Phone #:** Enter the FQHC/RHC clinic NPI number.

If you have any questions please contact the IME Provider Services Unit at 1-800-338-7909, or email at [IMEproviderservices@dhs.state.ia.us](mailto:IMEproviderservices@dhs.state.ia.us).